Fill in this information to identify your case:						
Debtor 1	CHRISTOPHER MICHAEL LOCASH					
Debtor 2 (Spouse, if filing)	ANGELA MARIE SALES					
United States E	Sankruptcy Court for the: District of Nevada					
Case number (if known)	23-11777					

Check one box	only as	directed	in thi	s form	and	in	Form
122A-1Supp:							

- 1. There is no presumption of abuse
- □ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

#### Official Form 122A - 1

### **Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
  - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
  - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Debt	or 1	Debtor non-fili	2 or ng spouse
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissi	ons (before all	\$	3,519.48	\$	0.00
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00
4.	All amounts from any source which are regularly portion of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	l. Include regula d, your depende	r contributions ents, parents,	\$	0.00	\$	0.00
5.	Net income from operating a business, profession,	or farm					
		Del	btor 1				
	Gross receipts (before all deductions)	\$0.00	_				
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from a business, profession, or far	·m \$ 0.00	Copy here ->	\$	0.00	\$	0.00
6.	Net income from rental and other real property						
		Del	btor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00

**CHRISTOPHER MICHAEL LOCASH** 

Debtor 1 **ANGELA MARIE SALES** 23-11777 Case number (if known) Debtor 2 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. EBT - Food Stamps 0.00 500.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 3,519.48 500.00 \$ \$ 4,019.48 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4.019.48 Multiply by 12 (the number of months in a year) 12 48,233.76 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. NV Fill in the number of people in your household. 3 86,618.00 Fill in the median family income for your state and size of household. 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14h Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ CHRISTOPHER MICHAEL LOCASH X /s/ ANGELA MARIE SALES

**CHRISTOPHER MICHAEL LOCASH** 

**ANGELA MARIE SALES** 

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Debtor 1

Signature of Debtor 1

Date

May 16, 2023

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**CHRISTOPHER MICHAEL LOCASH** Debtor 1 Debtor 2

23-11777 **ANGELA MARIE SALES** Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 11/01/2022 to 04/30/2023.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Las Vegas Rescue Mission

Income by Month:

6 Months Ago:	11/2022	\$5,463.01
5 Months Ago:	12/2022	\$3,461.54
4 Months Ago:	01/2023	\$1,807.69
3 Months Ago:	02/2023	\$3,461.54
2 Months Ago:	03/2023	\$3,461.54
Last Month:	04/2023	\$3,461.54
	Average per month:	\$3,519.48

**CHRISTOPHER MICHAEL LOCASH** 

Debtor 1 Debtor 2 23-11777 **ANGELA MARIE SALES** Case number (if known)

#### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 11/01/2022 to 04/30/2023.

Line 10 - Income from all other sources Source of Income: EBT - Food Stamps Constant income of \$500.00 per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill	Il in this information to identify your ca	ase:			
Deb	ebtor 1 CHRISTOPHER MIC	CHAEL LOCASH Middle Name	Last Name		
Deb	ebtor 2 ANGELA MARIE SA		Lastivanie		
	pouse if, filing)  First Name	Middle Name	Last Name		
Uni	nited States Bankruptcy Court for the:	DISTRICT OF NEVADA			
Cas	ase number 23-11777				
	known)			_	ck if this is an
				ame	nded filing
	fficial Form 106Sum				
			Certain Statistical Information		12/15
info		first; then complete the in	filing together, both are equally responsible f formation on this form. If you are filing amend box at the top of this page.		
Par	art 1: Summarize Your Assets				
				Your	assets
				Value	of what you own
1.				æ	0.00
	1a. Copy line 55, Total real estate, from	m Schedule A/B		Φ	0.00
	1b. Copy line 62, Total personal prope	erty, from Schedule A/B		\$	3,692.32
	1c. Copy line 63, Total of all property of	on Schedule A/B		\$	3,692.32
Par	art 2: Summarize Your Liabilities				
				Your	liabilities
					int you owe
2.	Schedule D: Creditors Who Have Clai	ims Secured by Property (Off	icial Form 106D)		
			pottom of the last page of Part 1 of Schedule D	\$	12,000.00
3.	Schedule E/F: Creditors Who Have U	nsecured Claims (Official For	m 106E/F)	_	0.00
	3a. Copy the total claims from Part 1	(priority unsecured claims) fro	om line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2	(nonpriority unsecured claims	s) from line 6j of Schedule E/F	\$	56,757.49
			Your total liabilities	\$	68,757.49
Dos	ort 2. Cummarina Vaur Income and E				·
rai	art 3: Summarize Your Income and E	:хрепses			
4.				\$	3,430.68
5.	Schedule J: Your Expenses (Official F			Φ.	3,430.00
	Copy your monthly expenses from line	e 22c of Schedule J		\$	3,430.00
Par	art 4: Answer These Questions for A	dministrative and Statistica	al Records		
6.	Are you filing for bankruptcy under  No. You have nothing to report o	•	this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you have?				
۲.		imer dehte Consumer deht	s are those "incurred by an individual primarily for	a norcon	al family or
			state those incurred by an individual primarily for statistical purposes. 28 U.S.C. § 159.	a persona	ai, idililiy, Ul
	Your debts are not primarily co		othing to report on this part of the form. Check thi	s box and	submit this form to

Official Form 106Sum Summ

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Debtor 1 CHRISTOPHER MICHAEL LOCASH

Debtor 2 ANGELA MARIE SALES Case number (if known) 23-11777

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,019.48

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	25,204.00
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	25,204.00

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Case r	number	23-11777										Check if this is an amended filing
												amondou ming
Offic	cial F	orm 106A	<u>/B</u>									
Sch	nedu	ıle A/B: I	Prop	erty								12/15
think it f	fits best.	Be as complete an ore space is neede	nd accura	ite as poss	ible. If two marr	ied people are fi	ling together, bo	th are equ	ally respon	nsible for su	upplyi	
Part 1:	Describ	be Each Residence	, Building	g, Land, or	Other Real Esta	te You Own or H	ave an Interest I	n				
1. <b>Do y</b> o	ou own o	or have any legal or	equitable	e interest i	n any residence	, building, land,	or similar proper	ty?				
■ No	o. Go to F	Part 2.										
□ Ye	es. Wher	e is the property?										
	ı own, le	be Your Vehicles ease, or have leg drives. If you lease									ehicle	es you own that
Do you someor	own, le ne else d s, vans,	ease, or have leg	a vehic	le, also re	port it on <i>Sche</i> d	dule G: Executo					ehicle	es you own that
Do you someon  3. Cars  □ No	own, le ne else d s, vans,	ease, or have leg drives. If you lease	a vehic	le, also re	port it on <i>Sche</i> e	dule G: Executo	ory Contracts ar	nd Unexpir	red Lease	ct secured c	laims	or exemptions. Put
Do you someor  3. Cars  N  Y  3.1	own, le ne else d s, vans, o es	ease, or have leg drives. If you lease trucks, tractors, Hyundai	a vehic	le, also re	who has an into	cles erest in the prop	ory Contracts ar	nd Unexpir D th	o not dedu	ct secured c	laims ed clai	
Do you someor  3. Cars  N  Y  3.1	own, leader of the control of the co	ease, or have leg drives. If you lease trucks, tractors, Hyundai Elantra 2015	e a vehic	le, also re	who has an into  Debtor 1 only	dule G: Executo cles erest in the prop	ory Contracts ar	D th	o not dedu e amount orreditors Wi	ct secured coof any secure ho Have Clau	laims ed clai ims So Cu	or exemptions. Put ims on <i>Schedule D:</i>
Do you someor  3. Cars  N  Y  3.1	own, leader of the control of the co	ease, or have leg drives. If you lease trucks, tractors, Hyundai	e a vehic	le, also re	Who has an into  Debtor 1 only Debtor 2 only Debtor 1 and	dule G: Executo cles erest in the prop	erty? Check one	D th	o not dedu e amount o reditors Wi	ct secured coof any secure ho Have Clau	laims ed clai ims So Cu	or exemptions. Put ims on Schedule D: ecured by Property.
Do you someor  3. Cars  N  Y  3.1	own, leader of the control of the co	ease, or have leg drives. If you lease trucks, tractors,  Hyundai Elantra 2015 nate mileage:	e a vehic	le, also re	Who has an interpretation of the color of th	erest in the prop	erty? Check one	D th	o not dedu e amount deductereditors Wi	ct secured coof any secure ho Have Clau	laims ed clai ims So Cu	or exemptions. Put ims on Schedule D: ecured by Property.

	ebtor 1 ebtor 2		HER MICHAEL LOCASH ARIE SALES	Case	number (if known)	23-11777
	Example No		furnishings nces, furniture, linens, china, kitchenware			
	■ Yes.	Describe				
			Household Goods			\$500.00
	□ No	es: Televisions	and radios; audio, video, stereo, and digital Il phones, cameras, media players, games	equipment; computers, printers,	scanners; music c	ollections; electronic devices
			Cell phones			\$200.00
	Example  No		d figurines; paintings, prints, or other artwor tions, memorabilia, collectibles	k; books, pictures, or other art ob	jects; stamp, coin,	or baseball card collections;
	Example  No	ent for sports a es: Sports, phot musical inst Describe	ographic, exercise, and other hobby equipn	nent; bicycles, pool tables, golf cl	ubs, skis; canoes a	and kayaks; carpentry tools;
	■ No		es, shotguns, ammunition, and related equip	oment		
	Clothes Examp  ☐ No		clothes, furs, leather coats, designer wear, s	hoes, accessories		
	Yes.	Describe				
			Clothes			\$100.00
	□ No ´		ewelry, costume jewelry, engagement rings	wedding rings, heirloom jewelry	watches, gems, ç	jold, silver
			Wedding Band			\$10.00
14.	Examp  ■ No □ Yes.  Any oth ■ No	-	nd household items you did not already	list, including any health aids y	ou did not list	
	☐ Yes.	Give specific in	formation			
15			of all of your entries from Part 3, includ		ave attached	\$810.00

	ebtor 1 ebtor 2	CHRISTOPH ANGELA M		HAEL LOCASH LES	Case number (if know	<sub>vn)</sub> 23-11777
P	art 4: De	scribe Your Finar	ncial Asset	e		
				quitable interest in any	y of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16	□ No			our wallet, in your home	, in a safe deposit box, and on hand when you file your pe	etition
					Cash on Hand	\$0.00
17					s; certificates of deposit; shares in credit unions, brokeraç h the same institution, list each.	ge houses, and other similar
					Institution name:	
			17.1.	Savings	SCE Federal Credit Union #0000	\$5.00
			17.2.	Checking	SCE Federal Credit Union #0040	\$38.00
			17.3.	Checking	UFCU #4608	\$3.32
			17.4.	Savings	UFCU #4608	\$5.00
			17.5.	Online Checking	Cash App	\$0.00
18	Examp			ely traded stocks ent accounts with broker	age firms, money market accounts	
	■ No □ Yes			Institution or issuer nam	ne:	
19	•	ublicly traded s enture	tock and	interests in incorporat	ed and unincorporated businesses, including an inte	rest in an LLC, partnership, and
		Give specific in		about them ne of entity:	% of ownership:	
20	Negoti	iable instrument	s include p	ersonal checks, cashie	ole and non-negotiable instruments rs' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
		Give specific inf		about them uer name:		
21		nent or pension ples: Interests in			b), thrift savings accounts, or other pension or profit-shari	ng plans
	_	List each accou		ely. of account:	Institution name:	

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	ebtor 1 ebtor 2		PHER MICHAEL MARIE SALES	LOCASH	Case number (if known)	23-11777
	Your sh Exampl	nare of all un		ave made so that you may continue prepaid rent, public utilities (electric,	service or use from a company gas, water), telecommunications compar	nies, or others
	■ No □ Yes			Institution name	or individual:	
23.	Annuitie	es (A contra	ct for a periodic payr	ment of money to you, either for life of	or for a number of years)	
	■ No □ Yes		Issuer name and d	lescription.		
	26 U.S.C		ation IRA, in an acc 1), 529A(b), and 529		n, or under a qualified state tuition pro	ogram.
	■ No □ Yes		Institution name ar	nd description. Separately file the rec	cords of any interests.11 U.S.C. § 521(c)	:
25.	Trusts, ■ No	equitable o	r future interests in	property (other than anything list	ted in line 1), and rights or powers exe	ercisable for your benefit
	☐ Yes.	Give specific	information about the	nem		
	Example ■ No	les: Internet		e secrets, and other intellectual pr sites, proceeds from royalties and lic		
	License	es, franchise	es, and other gener	al intangibles	dings, liquor licenses, professional licens	
	■ No	J	c information about the		anigs, ilquoi ilcerises, professional ilceris	i <del>cs</del>
Me	oney or p	property ow	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refu □ No	unds owed t	o you			
	_	Give specific	information about th	nem, including whether you already f	iled the returns and the tax years	
				Tax Refund	Federal	Unknown
				Tax Refund Earned Income (	Credit Federal	Unknown
	■ No	les: Past due	or lump sum alimor	ny, spousal support, child support, m	naintenance, divorce settlement, property	r settlement
	Exampi 	<i>les:</i> Unpaid v		rance payments, disability benefits, nade to someone else	sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific	information			
	Interest	s in insurar	nce policies	rance; health savings account (HSA)	; credit, homeowner's, or renter's insura	nce

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	ebtor 1 ebtor 2	CHRISTOPHER MICHAEL LOCASH ANGELA MARIE SALES	Case number (if known)	23-11777
	■ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
		Automobile Insurance Policy	Debtors	Unknown
32.	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance one has died.	ce policy, or are currently entitled to rec	eive property because
	■ No □ Yes.	Give specific information		
33.	Examp ■ No	against third parties, whether or not you have filed a lawsuit or moles: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim		
34.	■ No	contingent and unliquidated claims of every nature, including courting Describe each claim	nterclaims of the debtor and rights to	set off claims
	■ No	Give specific information		
36		the dollar value of all of your entries from Part 4, including any ent art 4. Write that number here	. • ,	\$51.32
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List	any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related property	?	
١	No. Go	to Part 6.		
I	☐ Yes. G	Go to line 38.		
Pa	rt 6: Des	scribe Any Farm- and Commercial Fishing-Related Property You Own or Ha ou own or have an interest in farmland, list it in Part 1.	ive an Interest In.	
46.	′	own or have any legal or equitable interest in any farm- or commo	ercial fishing-related property?	
	☐ Yes.	. Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not Li	ist Above	
53.		I have other property of any kind you did not already list?  ples: Season tickets, country club membership		
	☐ Yes.	Give specific information		
54	. Add t	the dollar value of all of your entries from Part 7. Write that number	r here	\$0.00

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**CHRISTOPHER MICHAEL LOCASH** Debtor 1 Case number (if known) 23-11777 **ANGELA MARIE SALES** Debtor 2 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$2,831.00 57. Part 3: Total personal and household items, line 15 \$810.00 58. Part 4: Total financial assets, line 36 \$51.32 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$3,692.32 \$3,692.32 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$3,692.32

Fill in this infor	Fill in this information to identify your case:						
Debtor 1							
	First Name	Middle Name	Last Name				
Debtor 2	ANGELA MARIE	SALES					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF NEVADA					
Case number	23-11777						
(if known)				☐ Check if this is an			
				amended filing			

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Household Goods Line from Schedule A/B: 6.1	\$500.00	•	\$500.00	Nev. Rev. Stat. § 21.090(1)(b)
Ellie II dill osiloddio 112. ori			100% of fair market value, up to any applicable statutory limit	
Cell phones Line from Schedule A/B: 7.1	\$200.00		\$200.00	Nev. Rev. Stat. § 21.090(1)(b)
Line Holli Schedule PVB. 7.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$100.00		\$100.00	Nev. Rev. Stat. § 21.090(1)(b)
Line IIIII Schedule PVD. 1111			100% of fair market value, up to any applicable statutory limit	
Wedding Band Line from Schedule A/B: 12.1	\$10.00		\$10.00	Nev. Rev. Stat. § 21.090(1)(a)
Line from Scredule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
Savings: SCE Federal Credit Union #0000	\$5.00		\$5.00	Nev. Rev. Stat. § 21.090(1)(z)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

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	btor 2 CHRISTOPHER MICHAEL LOCAS ANGELA MARIE SALES	ВН		Case number (if known)	23-11777	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Checking: SCE Federal Credit Union #0040	\$38.00		\$38.00	Nev. Rev. Stat. § 21.090(1)(z)	
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	Checking: UFCU #4608 Line from Schedule A/B: 17.3	\$3.32		\$3.32	Nev. Rev. Stat. § 21.090(1)(z)	
	Ene non concare, v.E.			100% of fair market value, up to any applicable statutory limit		
	Savings: UFCU #4608 Line from Schedule A/B: 17.4	\$5.00		\$5.00	Nev. Rev. Stat. § 21.090(1)(z)	
	Line noin Schedule A.B. 1114			100% of fair market value, up to any applicable statutory limit		
	Online Checking: Cash App Line from Schedule A/B: 17.5	\$0.00		\$0.00	Nev. Rev. Stat. § 21.090(1)(z)	
	Ellie Holli Gonedale 74 B. 1116			100% of fair market value, up to any applicable statutory limit		
	Federal: Tax Refund Line from Schedule A/B: 28.1	Unknown		100%	Nev. Rev. Stat. § 21.090(1)(z)	
	Ellie Holli Gonedale 74 B. 2511			100% of fair market value, up to any applicable statutory limit		
	Federal: Tax Refund Earned Income Credit	Unknown		100%	Nev. Rev. Stat. § 21.090(1)(aa)	
	Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3			led on or after the date of adjustmen	t.)	
	Yes. Did you acquire the property covere	d by the exemption wi	ithin 1	,215 days before you filed this case?	?	
	□ No □ Yes					

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Fill in this information	n to identify you	r case:			
Debtor 1 C	HRISTOPHER	MICHAEL LOCASH			
	st Name	Middle Name Last Name		-	
	NGELA MARIE	E SALES  Middle Name  Last Name		-	
3,					
United States Bankrup	tcy Court for the:	DISTRICT OF NEVADA		-	
Case number 23-11	777				
(if known)				☐ Che	ck if this is an
				ame	nded filing
Official Form 10	eD.				
		\A#\			
Schedule D:	Creditors	Who Have Claims Secure	ed by Propert	У	12/15
		f two married people are filing together, both are e out, number the entries, and attach it to this form.			
1. Do any creditors have	claims secured by	your property?			
☐ No. Check this	oox and submit t	nis form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes. Fill in all of	the information	pelow.			
Part 1: List All Sec	ured Claims				
2. List all secured claims	s. If a creditor has i	nore than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If more that	an one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Used Car Outl	et	Describe the property that secures the claim:	\$12,000.00	\$2,831.00	
Creditor's Name		2015 Hyundai Elantra 168,000 miles			
2580 Duneville	St	As of the date you file, the claim is: Check all that apply.			
Las Vegas, NV	89146	☐ Contingent			
Number, Street, City, S	State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the debt?	heck one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only			ecured		
■ Debtor 2 only  ■ Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the deb	•	☐ Judgment lien from a lawsuit			
Check if this claim re		Other (including a right to offset)			
Date debt was incurred		Last 4 digits of account number			
Add the dollar value of	f your entries in C	olumn A on this page. Write that number here:	\$12,00	00.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

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		0030 20 1111	, abi Do	O 10 Line	10100 00/10/	20 17.00.0-	r rage zi or	02
Fill in	n this inform	ation to identify your	case:					
Debt	or 1	CHRISTOPHER M	IICHAFI I OO	CASH				
Dobt	0. 1	First Name	Middle Na		Last Name			
Debt	or 2	ANGELA MARIE	SALES					
(Spous	se if, filing)	First Name	Middle Na	ime	Last Name			
Unite	ed States Ban	kruptcy Court for the:	DISTRICT O	F NEVADA				
Case	number 2	3-11777						
(if knov				-				Check if this is an
							а	mended filing
∩ffi	cial Form	106E/E						
		F: Creditors W	lha Haya	Uncopuro	d Claims			12/15
								ms. List the other party to
Sched left. At name	ule D: Creditor tach the Conti and case num	inuation Page to this pag ber (if known).	ured by Property je. If you have no	y. If more space o information to	is needed, copy th	ne Part you need, fil	ll it out, number the en	tries in the boxes on the
Part		of Your PRIORITY Un						
_	-	s have priority unsecure	u ciaiiis agaiis	at your				
	No. Go to Pa	rt 2.						
L	☐ Yes.							
Part	2: List All	of Your NONPRIORIT	Y Unsecured	Claims				
		s have nonpriority unsec						
С	ء No. You have	e nothing to report in this p	art. Submit this fo	orm to the court w	rith your other sched	dules.		
	Yes.				,			
u th	nsecured claim	nonpriority unsecured cl , list the creditor separately r holds a particular claim, li	y for each claim. I	For each claim list	ted, identify what type	pe of claim it is. Do r	not list claims already ind	cluded in Part 1. If more
								Total claim
4.1	Ace Cas	h Express	ı	Last 4 digits of a	account number			\$1,000.00
	Nonpriority 2237 E R	Creditor's Name Liverside Drive #102		When was the de	-			
	Austin, T	FX 78741 eet City State Zip Code		As of the date ve	ou filo, the claim is	: Check all that appl	V.	
		red the debt? Check one.	•	As of the date yo	ou me, me ciami is	. Спеск ан тат аррг	у	
	Debtor 1			_				
	Debtor 2	•		Contingent				
				Unliquidated				
		and Debtor 2 only		☐ Disputed				
	_	one of the debtors and and		• •	ORITY unsecured	claim:		
		f this claim is for a com	y	☐ Student loans				
	debt Is the claim	subject to offset?		□ Obligations ari report as priority of the priority		ation agreement or c	livorce that you did not	
	■ No					plans, and other sin	nilar debts	
	□ Yes			Other. Specify		· · · · · · · · · · · · · · · · · · ·		
	_ 103			- Other, Specify				_

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	r 2 ANGELA MARIE SALES		Case number (if known)	23-11777			
4.2	Atlantic Capital Bank	Last 4 digits of account number	7138		\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 945 East Paces Ferry Road, 16th Floor Atlanta, GA 30326	When was the debt incurred?	Opened 07/20 Las 4/14/21	st Active	· .		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorc	e that you did not			
	No	Debts to pension or profit-shari	ng plans, and other similar o	debts			
	Yes	Other. Specify Secured					
4.3	Austin Capital Bank	Last 4 digits of account number	0911		\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 8100 Shoal Creek Blvd, Ste 100 Austin, TX 78757	When was the debt incurred?	Opened 07/20 Las 04/21	st Active			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims					
	No	Debts to pension or profit-shari	debts				
	Yes	Other. Specify Secured					
4.4	Cash 1	Last 4 digits of account number			\$300.00		
	Nonpriority Creditor's Name 6708 W Cheyenne Ave	When was the debt incurred?					
	Las Vegas, NV 89108  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	■ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorc	e that you did not			
	■ No	Debts to pension or profit-shari	ng plans, and other similar o	debts			
	Yes	Other Specify Payday Lo	an				

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	angela Marie Sales		Case number (if known) 23-11	777
4.5	Central Portfolio Control	Last 4 digits of account number	2977	\$920.00
4.0	Nonpriority Creditor's Name Attn: Bankruptcy 10249 Yellow Circle Dr, Ste 200	When was the debt incurred?	Opened 12/22	
	Minnetonka, MN 55343  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you d	id not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Collection Center Ed	Attorney St Davids Medical Tx	
4.6	Central Portfolio Control Nonpriority Creditor's Name	Last 4 digits of account number	2978	\$920.00
	Attn: Bankruptcy 10249 Yellow Circle Dr, Ste 200	When was the debt incurred?	Opened 12/22	
	Minnetonka, MN 55343  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	Пол		
	<u> </u>	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure		
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	id not	
	■ No	Debts to pension or profit-sharir		
	_ 110	_ Collection	Ed	
	Yes	Other. Specify Tx		<del></del>
4.7	Check City Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	1990 N. Rainbow Las Vegas, NV 89108	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you d	id not
	Is the claim subject to offset?	report as priority claims		· /-
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify LOAN		

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	2 ANGELA MARIE SALES		Case number (if known) 23-11777	
4.8	Cornerstone	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name		Opened 10/09/19 Last Active	
	Pob Box 145122 Salt Lake City, UT 84114	When was the debt incurred?	11/01/20	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	Student loans		
	debt	Obligations arising out of a sep	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify		
		Education	al	
4.9	Covington Credit  Nonpriority Creditor's Name	Last 4 digits of account number	1777	\$0.00
	Attn: Bankruptcy		Opened 06/21 Last Active	
	Po Box 1947	When was the debt incurred?	08/21	
	Greenville, SC 29602  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	13. Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Note Loan		
4.1				
4.1 0	Covington Credit  Nonpriority Creditor's Name	Last 4 digits of account number	1030	\$0.00
	Attn: Bankruptcy Po Box 1947	When was the debt incurred?	Opened 03/21 Last Active 06/21	
	Greenville, SC 29602  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam	13. Officer all trial apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify		

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Debto Debto	or 1 CHRISTOPHER MICHAEL LOCASI ANGELA MARIE SALES	<del></del>	Case number (if known) 23-11777	
4.1 1	Covington Credit/smc	Last 4 digits of account number	1030	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1947 Greenville, SC 29602	When was the debt incurred?	Opened 3/01/21 Last Active 6/04/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Note Loan		
4.1 2	Dynamic Au	Last 4 digits of account number	7141	\$0.00
	Nonpriority Creditor's Name	_	Opened 8/17/18 Last Active	
	1500 E Cesar Chavez Austin, TX 78702	When was the debt incurred?	1/10/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Automobil	9	
4.1	Eastern Account System, Inc.	Last 4 digits of account number	5707	\$715.00
3	Nonpriority Creditor's Name			<del></del>
	Attn: Bankruptcy 111 Park Ridge Rd	When was the debt incurred?	Opened 11/18	
	Brookfield, CT 06804  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 00 0 , 0 , 0	S. S	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Associatio	Attorney Austin Radiological	

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	or 2 ANGELA MARIE SALES		Case number (if known)	23-11777	
4.1 4	Enhanced Recovery Company	Last 4 digits of account number	3368		\$1,907.00
	Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256	When was the debt incurred?	Opened 08/20		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	No	☐ Debts to pension or profit-sharing	ng plans, and other similar de	bts	
	Yes	Other. Specify Collection	Attorney Sprint		
4.1 5	Fingerhut	Last 4 digits of account number	1444		\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 01/21 Last 08/21	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar de	ebts	
	Yes	Other. Specify Charge Ac	count		
4.1 6	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	1235		\$424.00
	Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 06/20 Last 3/23/23	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	bts	
	Yes	Other. Specify Credit Care	d		

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Hfh/covington Credit O	Last 4 digits of account number	1777		\$0.00
Nonpriority Creditor's Name	_	Onemad 00/24   a	at Aathua	
Po Box 1947 Greenville, SC 29602	When was the debt incurred?	Opened 06/21 La 1/31/22	St Active	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorc	ce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar	debts	
□ Yes	Other. Specify Note Loan			
Kikoff Lending Llc	Last 4 digits of account number	KTY3		\$0.00
Nonpriority Creditor's Name				· ·
Attn: Bankruptcy 75 Broadway Suite 226	When was the debt incurred?	Opened 02/23 La 4/19/23	st Active	
San Francisco, CA 94111  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	•	,		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divord	ce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar	debts	
Yes	Other. Specify Charge Acc	count		
LendNation	Last 4 digits of account number			\$300.00
Nonpriority Creditor's Name	Last 4 digits of account number			4000.00
2095 N. Jones Blvd. Las Vegas, NV 89108	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	aration agreement or divorc	ce that you did not	
Is the claim subject to offset?	report as priority claims			
No	☐ Debts to pension or profit-sharing	ng plans, and other similar	debts	
☐ Yes	■ Other. Specify Payday Loa	an		

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or 2 ANGELA MARIE SALES		Case number (if known) 23-11777	
Midland Funding/Midland Credit Mgmt	Last 4 digits of account number	2696	\$687.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 939069 San Diego, CA 92193	When was the debt incurred?	Opened 02/22 Last Active 08/21	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing		
Yes	Other. Specify Factoring (	Company Account Webbank	
Midland Funding/Midland Credit			
Mgmt	Last 4 digits of account number	0459	\$609.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 939069	When was the debt incurred?	Opened 03/22 Last Active 08/21	
San Diego, CA 92193  Number Street City State Zip Code	As of the date you file, the claim		
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
$\square$ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Bank N.A.	Company Account Credit One	
Mission Lane LLC	Last 4 digits of account number	4487	\$459.00
Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 105286 Atlanta. GA 30348	When was the debt incurred?	Opened 01/21 Last Active 09/21	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	, , ,		
⊔ Yes	Other. Specify Credit Card	<u> </u>	

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Debto Debto	or 1 CHRISTOPHER MICHAEL LOCASI ANGELA MARIE SALES		Case number (if known) 23-11777	
4.2 3	Mohela	Last 4 digits of account number	8513	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 4/21/16 Last Active 6/06/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify	<del>.</del>	
		Educationa	ll	
4.2 4	Mohela	Last 4 digits of account number	8113	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 6/02/16 Last Active 6/06/18	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa		
4.2 5	Mohela  Nonpriority Creditor's Name	Last 4 digits of account number	8414	\$0.00
	Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 11/09/15 Last Active 6/06/18	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educations	ı	

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Debtor 1 CHRISTOPHER MICHAEL LOCASH 23-11777 Debtor 2 ANGELA MARIE SALES Case number (if known) 4.2 9515 Mohela \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/12 Last Active 633 Spirit Dr When was the debt incurred? 07/17 Chesterfield, MO 63005 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Government Unsecured Guarantee Loan** 4.2 Mohela 9415 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/12 Last Active 633 Spirit Dr When was the debt incurred? 07/17 Chesterfield, MO 63005 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Government Unsecured Guarantee Loan ☐ Yes 4.2 9913 Mohela \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 5/04/16 Last Active Attn: Bankruptcy 6/06/18 633 Spirit Dr When was the debt incurred? Chesterfield, MO 63005 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational

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Debto Debto	or 1 CHRISTOPHER MICHAEL LOCASI ANGELA MARIE SALES	Н	Case number (if known) 23-1177	7
4.2 9	Mohela	Last 4 digits of account number	8314	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 11/09/15 Last Active 6/06/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did n	ot
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
		Education	al	
4.3 0	Mohela Nonpriority Creditor's Name	Last 4 digits of account number	9813	\$0.00
	Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 5/23/16 Last Active 6/06/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans		
	debt  Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did n	ot
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
		Education	al	
4.3 1	Money Tree	Last 4 digits of account number		\$253.34
	Nonpriority Creditor's Name 7291 W. Lake Mead Blvd Las Vegas, NV 89128	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did n	ot
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Payday Lo		
		· · · /		

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Debtor 1 CHRISTOPHER MICHAEL LOCASH 23-11777 Debtor 2 ANGELA MARIE SALES Case number (if known) 4.3 **Mountain View Hospital** Unknown Last 4 digits of account number 2 Nonpriority Creditor's Name 3100 N Tenaya Way When was the debt incurred? Las Vegas, NV 89128 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ■ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Bill 4.3 National Credit Adjusters, LLC 0826 \$1,780.00 Last 4 digits of account number Nonpriority Creditor's Name 327 West 4th Avenue Opened 11/19 Last Active When was the debt incurred? 02/18 Po Box 3023 Hutchinson, KS 67504 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account The Cash** ☐ Yes Other. Specify Store 4.3 National Credit Adjusters, LLC 3545 \$242.00 Last 4 digits of account number Nonpriority Creditor's Name 327 West 4th Avenue Opened 12/19 Last Active Po Box 3023 When was the debt incurred? 12/16 Hutchinson, KS 67504 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Factoring Company Account Speedy Cash

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Debte Debte	or 1 CHRISTOPHER MICHAEL LOCASI ANGELA MARIE SALES	H 	Case number (if known) 23-11777	
4.3 5	Pro Collect, Inc	Last 4 digits of account number	6481	\$6,809.00
	Nonpriority Creditor's Name Attn: Bankruptcy 12170 N Abrams Road, Ste 100 Dallas, TX 75243	When was the debt incurred?	Opened 04/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify	Attorney Quad East Ballpark	
4.3	Rapid Cash	Last 4 digits of account number		\$898.15
	Nonpriority Creditor's Name 1532 N Jones Blvd, Las Vegas Las Vegas, NV 89108	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Payday Lo	an	
4.3	Rash Curtis & Associates  Nonpriority Creditor's Name	Last 4 digits of account number	1876	\$12,628.00
	Attn: Bankruptcy 190 S. Orchard Ave	When was the debt incurred?	Opened 12/19	
	Vacaville, CA 95688  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection	Attorney Highland Hospital	

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Debto Debto	r 1 CHRISTOPHER MICHAEL LOCASH r 2 ANGELA MARIE SALES		Case number (if known) 23-11777	
4.3 8	Sallie Mae, Inc	Last 4 digits of account number	0128	\$7,489.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 10/19 Last Active 3/01/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated☐		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g plans, and other similar debts	
		Educationa		
		Eddodiioni	•	
4.3 9	Simplebill  Nonpriority Creditor's Name	Last 4 digits of account number	0889	\$0.00
		When was the debt incurred?	Opened 01/18 Last Active 06/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consolidat	ion	
4.4	Simplebill  Nonpriority Creditor's Name	Last 4 digits of account number	0889	\$0.00
		When was the debt incurred?	Opened 04/18 Last Active 04/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	Other. Specify Consolidat	ion	

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2 ANGELA MARIE SALES		Case number (if known) 23-11777	
Tacaccpt	Last 4 digits of account number	529A	\$0.0
Nonpriority Creditor's Name	•	0	
Po Box 153156 Austin, TX 78715	When was the debt incurred?	Opened 5/21/21 Last Active 3/15/22	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Automobile	9	
Tacaccpt	Last 4 digits of account number	0401	\$0.0
Nonpriority Creditor's Name			
Po Box 153156 Austin, TX 78715	When was the debt incurred?	Opened 1/23/20 Last Active 5/14/21	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Automobile		
U.S. Department of Education	Last 4 digits of account number	6621	\$4,498.0
Nonpriority Creditor's Name Ecmc/Attn: Bankruptcy P.O. Box 16408	When was the debt incurred?	Opened 06/18 Last Active 04/23	
Saint Paul, MN 55116	A control of the state of the state of		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Contingent		
■ Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt	_	pration agreement or diverse that you did not	
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
, <del>-</del>	· · · ————	al Direct Loans	

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Debto Debto	or 1 CHRISTOPHER MICHAEL LOCASH ANGELA MARIE SALES		Case number (if known) 23-11777	
4.4 4	U.S. Department of Education	Last 4 digits of account number	6931	\$3,471.00
	Nonpriority Creditor's Name Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 06/18 Last Active 04/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a separeport as priority claims</li></ul>	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify	ig plane, and other cirrinal desice	
	Li res	· · · —	al Direct Loans	
4.4				
5	U.S. Department of Education	Last 4 digits of account number	6599	\$3,403.00
	Nonpriority Creditor's Name Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 06/18 Last Active 04/23	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	Пол		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	d Glaini.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	al Direct Loans	
4.4 6	U.S. Department of Education  Nonpriority Creditor's Name	Last 4 digits of account number	6626	\$2,968.00
	Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 06/18 Last Active 04/23	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educations	I Direct Loans	

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Debtor Debtor	1 CHRISTOPHER MICHAEL LOCASH 2 ANGELA MARIE SALES		Case number (if known) 23-11777			
4.4 7	U.S. Department of Education	Last 4 digits of account number	6608	\$2,537.00		
	Nonpriority Creditor's Name Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 06/18 Last Active 04/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
		Educationa	al Direct Loans			
4.4 8	U.S. Department of Education  Nonpriority Creditor's Name	Last 4 digits of account number	6616	\$838.00		
	Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 06/18 Last Active 04/23			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
		Education	Educational Direct Loans			
4.4 9	United Revenue Corp.	Last 4 digits of account number	8842	\$502.00		
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 04/20			
	204 Billings Street Ste 120 Arlington, TX 76010					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	□ Obligations arising out of a separate of a sepa	aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts			
		Collection	Attorney Texas Medicine			
	☐ Yes	Other. Specify Resources	<u> </u>			

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Debtor 1 CHRISTOPHER MICHAEL LOCASH 23-11777 Debtor 2 ANGELA MARIE SALES Case number (if known) 4.5 \$200.00 Wells Fargo Last 4 digits of account number 0 Nonpriority Creditor's Name Po Box 6995 When was the debt incurred? Portland, OR 97228 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 25,204.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 31,553.49
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 56,757.49

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this informati	ion to identify your	case:		
Debtor 1	CHRISTOPHER M	IICHAEL LOCASH		
	First Name	Middle Name	Last Name	
Debtor 2	ANGELA MARIE	SALES		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankro	uptcy Court for the:	DISTRICT OF NEVADA		
Case number 23-	11777			
(if known)				Check if this is an
				amended filing

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1			<u> </u>		
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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Fill in th	is informa	tion to identify your	case:			
Debtor 1			MICHAEL LOCASH			
		First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		ANGELA MARIE First Name	SALES Middle Name	Lost Nome		
(Spouse if,	filing)	First Name		Last Name		
United S	tates Bank	ruptcy Court for the:	DISTRICT OF NEVADA			
Case nu	mber 23	-11777				
(if known)					☐ Check if this is an	
					amended filing	
Officia	al Forr	m 106H				
		ե Your Cod	ahtars		12/15	
SCITE	uuie i	1. 10ul Cou	CDIOI 3		12/13	_
people and it out, your nam	re filing to and numb ne and cas o you have	gether, both are equoer the entries in the entries in the enumber (if known	ally responsible for supplyir	ng correct informat e Additional Page t	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page o this page. On the top of any Additional Pages, write as a codebtor.	<b>&gt;</b> ,
■ N □ Y						
			u lived in a community prope , Nevada, New Mexico, Puerto		y? (Community property states and territories include ngton, and Wisconsin.)	
ПΝ	o. Go to lin	e 3				
_			use, or legal equivalent live wit	th you at the time?		
	□ No					
	Yes.					
	<b>—</b> 100.					
	ln v	which community stat	e or territory did you live?	Nevada	. Fill in the name and current address of that person.	
	Sa	njuana Estrada R	osiles		Finalized: NOV 15, 2019	
	Nan	ne of your spouse, former sp	ouse, or legal equivalent		Case No.: D-1-FM-19-005543	
	Nun	nber, Street, City, State & Zi	o Code			
in liı Forr	ne 2 again	as a codebtor only chedule E/F (Officia	if that person is a guarantor	or cosigner. Make	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 6G). Use Schedule D, Schedule E/F, or Schedule G to	ial
		1: Your codebtor ber, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debta Check all schedules that apply:	
3.1					☐ Schedule D, line	
	Name				☐ Schedule E/F, line	
					☐ Schedule G, line	
	Number	Street			_	
	City		State	ZIP Code		
3.2					☐ Schedule D, line	
J.2	Name				Schedule E/F, line	
					☐ Schedule G, line	
	Number	Street			_	
	City		State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill in this information	to identify your case:	
Debtor 1	CHRISTOPHER MICHAEL LOCASH	
Debtor 2 (Spouse, if filing)	ANGELA MARIE SALES	
United States Bankru	uptcy Court for the: DISTRICT OF NEVADA	
Case number (If known)	3-11777	Check if this is:  An amended filing  A supplement showing postpetition chapte
Official Forn	n 106 <u>l</u>	13 income as of the following date:  MM / DD/ YYYY

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	□ Not employed	■ Not employed
	employers.	Occupation	Sous Chef	
	Include part-time, seasonal, or self-employed work.	Employer's name	Las Vegas Rescue Mission	
	Occupation may include student or homemaker, if it applies.	Employer's address	480 W. Bonanza Las Vegas, NV 89106	
		How long employed ti	nere? 1 year, 2 months	

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

				ng spouse
2.	\$	3,519.48	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	3,519.48	\$	0.00

For Debtor 1 For Debtor 2 or

Schedule I: Your Income Official Form 106I page 1

Deb	tor 1 tor 2	CHRISTOPHER MICHAEL LOCASH ANGELA MARIE SALES	-		Case	e number ( <i>if k</i> i	nowr	ı) _	23-11777		
					Fo	r Debtor 1			For Debto		
	Cop	by line 4 here	4.		\$_	3,519	9.48	3	\$	0.0	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	500	6.40	)	\$	0.0	0
	5b.	Mandatory contributions for retirement plans	5b		\$		0.0		\$	0.0	
	5c.	Voluntary contributions for retirement plans	5c	<b>)</b> .	\$		0.0	_	\$	0.0	
	5d.	Required repayments of retirement fund loans	5d	d.	\$		0.0		\$	0.0	
	5e.	Insurance	5e	€.	\$	82	2.40	0	\$	0.0	0
	5f.	Domestic support obligations	5f.		\$		0.0	<u> </u>	\$	0.0	0
	5g.	Union dues	5g	j.	\$		0.0	ว <sup>¯</sup>	\$	0.0	0
	5h.	Other deductions. Specify:	_ 5h	1.+	\$_		0.0	+ 0	\$	0.0	0
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	588	8.8	)	\$	0.0	0_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,930	0.6	3_	\$	0.0	0_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a	\$		0.00	n	\$	0.00	n
	8b.	Interest and dividends	8b		\$-		0.00	_	\$	0.0	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		0.0		\$	0.0	
	8d.	Unemployment compensation	8d	d.	\$		0.0		\$	0.0	
	8e.	Social Security	8e	€.	\$		0.0	)	\$	0.0	0
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Food Stamps - EBT  Pension or retirement income	8f.		\$_ \$_		0.00	_	\$ \$	500.0	
	8g.		8g		· -		0.0	_	т	0.0	
	8h.	Other monthly income. Specify:	_ 8n	1.+ _	\$_		0.00	<u> </u>	<b>*</b>	0.0	<u>U</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(	0.0	)	\$	500.0	00
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		2,930.68	1.	\$	500.00	= \$	3,430.68
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		* -		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<b>-</b>	000.00	-     · -	0,100100
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			•			d in <i>Schedu</i>	le J. +\$ _	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies								\$	3,430.68
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?								nly income
		Yes. Explain:									

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:					
	otor 1			AEL LOCASH		Che	ck if this is:	
'	otor 2	ANGELA MA	ARIE SAL	ES		1	An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
` '	, 0,	ruptcy Court for the	: DISTRI	CT OF NEVADA		-	MM / DD / YYYY	
Cas		3-11777						
		orm 106J				I		
Be info	as complete ormation. If n		possible.	If two married people ar ch another sheet to this				
Par 1.	t 1: Desc	ribe Your House nt case?	ehold					
	☐ No. Go t							
		es Debtor 2 live	in a separ	ate household?				
	■ N		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you hav	ve dependents?	□ No					
	Do not list Debtor 2.	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state dependents				Son		5 months	□ No ■ Yes
								□ No □ Yes
								□ No □ Yes
								□No
3.	Do vour ex	penses include	_					☐ Yes
0.	expenses of	of people other to ad your depende	han 👝	No Yes				
Est	imate your e	a date after the	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. I	nclude first mortgage	e 4. §	S	836.00
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a. \$	3	0.00
		erty, homeowner's				4b. \$		25.00
		e maintenance, re eowner's associat		ıpkeep expenses dominium dues		4c. \$ 4d. \$		150.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Debto Debto		CHRISTOPHER MICHAEL LOCASH ANGELA MARIE SALES	Case num	ber (if known)	23-11777
6.	Utilitie	s:			
(	6a. I	Electricity, heat, natural gas	6a.	\$	350.00
(		Nater, sewer, garbage collection	6b.	\$	80.00
		Telephone, cell phone, Internet, satellite, and cable services	6c.		200.00
		Other. Specify:	6d.	\$	0.00
		and housekeeping supplies	7.	\$	409.00
		are and children's education costs	8.	\$	0.00
		ng, laundry, and dry cleaning	9.	\$	100.00
		nal care products and services	10.	\$	180.00
		al and dental expenses	11.	\$	0.00
		portation. Include gas, maintenance, bus or train fare.	12.	\$	250.00
		include car payments.		· -	
		ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
		able contributions and religious donations	14.	\$	0.00
-	Insura	include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
		Health insurance	15b.	·	0.00
		Vehicle insurance	15c.	· · · · · · · · · · · · · · · · · · ·	250.00
		Other insurance. Specify:	15d.	·	0.00
		Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Specify		16.	\$	0.00
		ment or lease payments:		,	
		Car payments for Vehicle 1	17a.	\$	500.00
	17b. (	Car payments for Vehicle 2	17b.	\$	0.00
		Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
8.	Your p	payments of alimony, maintenance, and support that you did not report as	<u> </u>		
	deduc	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9.	Other	payments you make to support others who do not live with you.		\$	0.00
	Specify		19.		
		real property expenses not included in lines 4 or 5 of this form or on Sche			
		Mortgages on other property	20a.	· -	0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.		0.00
	20d. l	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. l	Homeowner's association or condominium dues	20e.	\$	0.00
1.	Other:	Specify:	21.	+\$	0.00
2	Calcul	ate your monthly expenses			
		dd lines 4 through 21.		\$	3,430.00
		opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,430.00
				·	2 100 00
	22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	3,430.00
3.	Calcul	ate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,430.68
		Copy your monthly expenses from line 22c above.	23b.	· ·	3,430.00
:		Subtract your monthly expenses from your monthly income.	00 -	•	0.60
	•	The result is your monthly net income.	23c.	\$	0.68
1	For exa modifica	LI expect an increase or decrease in your expenses within the year after your puller, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage?			ease or decrease because of a
	■ No.				
	☐ Yes	Explain here:			

Fill in this inform	nation to identify your	case:			
Debtor 1	CHRISTOPHER M	MICHAEL LOCASH			
	First Name	Middle Name	Las	et Name	
Debtor 2	ANGELA MARIE	SALES			
(Spouse if, filing)	First Name	Middle Name	Las	st Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEVADA			
Case number	23-11777				
(if known)					Check if this is an amended filing
Official Forn <b>Declarat</b>		ın Individual	Debt	or's Schedules	12/15
If two married ne	onle are filing togethe	r hoth are equally respor	sible for s	supplying correct information.	
	opio aro ming togotilo	, som are equally respon	101010101	applying correct information	
obtaining money		n connection with a bank		ed schedules. Making a false state se can result in fines up to \$250,00	
Sign	n Below				
Did you pay	y or agree to pay some	one who is NOT an attorn	ney to help	you fill out bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				kruptcy Petition Preparer's Notice, ,, and Signature (Official Form 119)
	ity of perjury, I declare true and correct.	that I have read the sumr	mary and s	schedules filed with this declaration	on and
X /s/ CHR	RISTOPHER MICHAE	L LOCASH	х	/s/ ANGELA MARIE SALES	
	TOPHER MICHAEL I			ANGELA MARIE SALES	
Signatur	e of Debtor 1			Signature of Debtor 2	

Date May 16, 2023

Date May 16, 2023

	II to this informs					
		ation to identify you				
De	ebtor 1	CHRISTOPHER First Name	MICHAEL LOCASH  Middle Name	Last Name		
De	ebtor 2	ANGELA MARIE	SALES			
(Sp	oouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Banl	kruptcy Court for the:	DISTRICT OF NEVADA			
1 -	ase number 23	3-11777				Check if this is an amended filing
_	fficial For		Affairs for Indivi	duals Filing for E	Bankruptcy	04/2
inf	ormation. If mo		ble. If two married people attach a separate sheet to stion.			
Pa	art 1: Give De	etails About Your Ma	arital Status and Where You	ı Lived Before		
1.	What is your	current marital statu	ıs?			
	Married					
	■ Married □ Not marri	ied				
2.	During the las	st 3 years, have you	lived anywhere other than	where you live now?		
	_	or o years, nave yea	iivod dilywiioro otiior tiidir	where you live how.		
	□ No ■ Year Link		in and in the least One are Dem	at in almala mila ana mani lima man		
	Yes. List	all of the places you i	ived in the last 3 years. Do n	ot include where you live no	N.	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	7205 Becke Austin, TX		From-To: <b>2020 - 09/202</b>	Same as Debtor	1	■ Same as Debtor 1 From-To:
	7200 Tea B Austin, TX		From-To: <b>2018 - 2020</b>	■ Same as Debtor	1	Same as Debtor 1 From-To:
	tes and territorie □ No ■ Yes. Mak	s include Arizona, Ca	ver live with a spouse or leadifornia, Idaho, Louisiana, Nebedule H: Your Codebtors (Cornome	vada, New Mexico, Puerto F		
_	•					
4.	Fill in the total	amount of income yo	nployment or from operation u received from all jobs and have income that you receive	all businesses, including par	t-time activities.	alendar years?
	□ No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Debtor Debtor		TOPHER MICHA LA MARIE SALES		Cas	e number (if known) 23-1	1777
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,326.93	☐ Wages, commission bonuses, tips	ns, \$0.00
			☐ Operating a business		☐ Operating a busines	SS
	t calendar y ry 1 to Dece	vear: ember 31, 2022 )	■ Wages, commissions, bonuses, tips	\$42,313.00	☐ Wages, commission bonuses, tips	ns, <b>\$0.00</b>
			☐ Operating a business		Operating a busines	SS
		ear before that: ember 31, 2021)	■ Wages, commissions, bonuses, tips	\$36,839.00	☐ Wages, commission bonuses, tips	ns, <b>\$0.00</b>
			☐ Operating a business		Operating a busines	SS
	No Yes. Fill in	the details.	Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
			Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
Part 3:	List Cert	ain Payments You	Made Before You Filed for	Bankruptcy		
6. Ard	e either Deb No. Nei	tor 1's or Debtor 2 ther Debtor 1 nor Devidual primarily for a	's debts primarily consumer Debtor 2 has primarily consument Depresonal, family, or househouse you filed for bankruptcy, di	r debts? umer debts. Consumer debts ld purpose."		§ 101(8) as "incurred by an
		No. Go to line 7		d you pay any creditor a tota	ror\$7,575 or more?	
		paid that cr not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for tl t on 4/01/25 and every 3 year	nts for domestic support oblights bankruptcy case.	ations, such as child sup	port and alimony. Also, do
•			or both have primarily consu ore you filed for bankruptcy, di		of \$600 or more?	
		No. Go to line 7	<b>,</b> .			
	•	include pay	each creditor to whom you pai rments for domestic support o this bankruptcy case.			
Cı	editor's Na	me and Address	Dates of payme	nt Total amount	Amount you Was still owe	this payment for

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Det	otor 2 ANGELA MARIE SALES		Cas	se number (if known)	23-11///	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payn	nent for
	Used Car Outlet 2580 Duneville St Las Vegas, NV 89146	3/8/23, 3/22/23, 4/5/23, 4/19/23, 5/03/23, 5/17/23, 5/31/23	\$1,500.00	\$12,000.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repay ☐ Suppliers or ☐ Other	
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a general p ny managing age	artner; corporation nt, including one fo
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	is payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ecount of a debt	that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi Include creditor	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.   No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the o	case
	CHRISTOPHER MICHAEL LOCASH AND SANJUANA ESTRADA ROSILES D-1-FM-19-005543	AGREED FINAL DECREE OF DIVORCE	Travis Central District 850 E Anderso Austin, TX 787	n Ln	☐ Pending ☐ On appeal ☐ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached, s	seized, or levied?
	<ul><li>No. Go to line 11.</li><li>☐ Yes. Fill in the information below.</li></ul>					
	Creditor Name and Address	Describe the Property  Explain what happene	d	Date		Value of the property
11.	accounts or refuse to make a payment became No		sluding a bank or fir	nancial institution	, set off any amo	ounts from your
	☐ Yes. Fill in the details.  Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
				tu.tu.		

Debtor 1

**CHRISTOPHER MICHAEL LOCASH** 

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Debtor 1 Debtor 2		CASH	Case number	(if known) <b>23-11777</b>	
	hin 1 year before you filed for bankru rrt-appointed receiver, a custodian, or		vas any of your property in the possession of an	assignee for the bend	efit of creditors, a
■ □	No Yes	anou	or ornorar:		
Part 5:	List Certain Gifts and Contribution	s			
	hin 2 years hefere you filed for honky		did you give only gifte with a total value of more t	han \$600 nar naraan	2
13. WILI	nin 2 years before you filed for bankri No	uptcy,	did you give any gifts with a total value of more t	man \$600 per person	f
	Yes. Fill in the details for each gift.				
	its with a total value of more than \$60 r person	0	Describe the gifts	Dates you gave the gifts	Value
	rson to Whom You Gave the Gift and dress:				
14. <b>Wit</b> l	hin 2 years before you filed for bankru No	uptcy,	did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co	ontribu	tion.		
mo Ch	its or contributions to charities that to ore than \$600 arity's Name dress (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Au	uress (Number, Street, City, State and ZIP Code	€)			
Part 6:	List Certain Losses				
15. With org	hin 1 year before you filed for bankru  pambling?	ptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster
	No				
	Yes. Fill in the details.	_			
	scribe the property you lost and w the loss occurred	Includ	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Dort 7:	List Cartain Baymonta ar Transfera		,		
Part 7:	List Certain Payments or Transfers	5			
con	sulted about seeking bankruptcy or p	orepar	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	No				
	Yes. Fill in the details.				
Ad Em	rson Who Was Paid dress nail or website address rson Who Made the Payment, if Not Y	ou'	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Fa 87 Su La he	ir Fee Legal Services 51 W. Charleston Blvd. ite 220 s Vegas, NV 89117 lp@bkvegas.com btor		Attorney Fees	04/14/2023, 05/02/2023	\$999.00

Debtor 1 CHRISTOPHER MICHAEL LOCASH

Deb	tor 2 ANGELA MARIE SALES		Ca	ase number (if kn	own) 23-11777	
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or not include any payment or transfer that you list	or to make payments			ansfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v	alue of any prope	0	rate payment r transfer was nade	Amount o
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already listed No  Yes. Fill in the details.	ness or financial affa as security (such as t	nirs? he granting of a se			
	Person Who Received Transfer Address	Description and very property transfers		Describe any payments rec paid in excha	eived or debts	Date transfer was made
	Person's relationship to you  Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No  Yes. Fill in the details.		y property to a se	If-settled trust (	or similar device	of which you are a
	Name of trust	Description and v	alue of the proper	rty transferred		Date Transfer was
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	age Units		
	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accou	nts; certificates of	-		
		ast 4 digits of ccount number	Type of account instrument		•	Last balance before closing o transfe
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for	bankruptcy, any	safe deposit bo	ox or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the con	itents	Do you still have it?
22.	Have you stored property in a storage unit or p  ■ No □ Yes Fill in the details	place other than your	home within 1 ye	ar before you fi	iled for bankrupto	y?
	Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S		escribe the con	itents	Do you still have it?

**CHRISTOPHER MICHAEL LOCASH** 

De	otor 2 ANGELA MARIE SALES		Case number (if known) 23-11/1/	
Pa	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	rty you borrowed from, are storing for	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pa	t 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	- ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	istrative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	t 11: Give Details About Your Business or Con	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	, either full-time or part-time	
	☐ A member of a limited liability company	y (LLC) or limited liability partnersh	nip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		

 $\hfill\square$  An owner of at least 5% of the voting or equity securities of a corporation

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		CHRISTOPHER MICHAEL LOCA ANGELA MARIE SALES	SH		Cas	se number (if known)	:	23-11777
							_	
		No. None of the above applies. Go to	Part 12.					
Debtor 2  No You Busin Addre (Number 128. Within institute 129. No Name Addre (Number 129. St. CHRISTO Signature Date Ma	Yes. Check all that apply above and fi	II in the details b	el	ow for each business.				
	Add			Do				ation number cial Security number or ITIN.
	(Nulli	ber, Street, City, State and ZIP Code)	Name of accou	ur	ntant or bookkeeper	Dates business	ex	isted
		siness? Include all financial						
		No						
		Yes. Fill in the details below.						
	Add		Date Issued					
Part	12:	Sign Below						
are tr with	rue a a bar	d the answers on this <i>Statement of Fi</i> nd correct. I understand that making ankruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	a false statement	i, (	concealing property, or ol	btaining money or		
/s/ (	CHRI	STOPHER MICHAEL LOCASH	/s/ AN	10	GELA MARIE SALES			
-	_	OPHER MICHAEL LOCASH			_A MARIE SALES			
Sign	atur	e of Debtor 1	Signa	tι	re of Debtor 2			
Date	<u> M</u>	lay 16, 2023	Date		May 16, 2023			
Did y	ou a	ttach additional pages to Your Statem	ent of Financial	A	ffairs for Individuals Filing	g for Bankruptcy (	Of	ficial Form 107)?
■ No	)							
□ Ye	es							
Did y	ou p	ay or agree to pay someone who is no	ot an attorney to	h	elp you fill out bankruptcy	forms?		
■ No	)		-					
□ Y€	es. Na	ame of Person Attach the Bankr	uptcy Petition Pre	pa	arer's Notice, Declaration, a	nd Signature (Offici	ial	Form 119).

Fill in this infor	mation to identify your case:		
Debtor 1	CHRISTOPHER MICHAEL LOCAS	3H	
	First Name Middle Name	Last Name	
Debtor 2	ANGELA MARIE SALES		
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: DISTRICT OF N	EVADA	
Case number	23-11777		
(if known)	23-11777		☐ Check if this is an
			amended filing
Official Fo	vrm 108		
			_
Stateme	nt of intention for indi-	viduals Filing Under Chapte	er / 12/15
	lividual filing under chapter 7, you must f	ill out this form if:	
	re claims secured by your property, or		
	sed personal property and the lease has it	not expired. r you file your bankruptcy petition or by the date se	t for the meeting of creditors
		he time for cause. You must also send copies to the	
on the	form		
If two married po	eople are filing together in a joint case, b	oth are equally responsible for supplying correct in	formation. Both debtors must
	nd date the form.		
Re as complete	and accurate as possible. If more space	is needed, attach a separate sheet to this form. On	the top of any additional pages
	our name and case number (if known).	io nocessa, attacin a coparato choct to ano formi on	ino top of any additional pages,
Part 1: List Y	our Creditors Who Have Secured Claims		
•	•	D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information be	elow. editor and the property that is collateral	What do you intend to do with the property that	Did you claim the property
	Cancer and the property man to contact an	secures a debt?	as exempt on Schedule C?
Creditor's L	Jsed Car Outlet	□ O	E No
name:	Jsed Car Odilet	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
name.		Retain the property and redeem it.  Retain the property and enter into a	■ Yes
Description of		Reaffirmation Agreement.	. 33
property	miles	Retain the property and [explain]:	
securing debt	:	Retain and Make Regular Payments	_
Dort 2: Liet V	our Unavaired Personal Property Leases		
	our Unexpired Personal Property Leases ed personal property lease that you listed	d in Schedule G: Executory Contracts and Unexpire	d Leases (Official Form 106G), fill
in the information	on below. Do not list real estate leases. U	nexpired leases are leases that are still in effect; the	e lease period has not yet ended.
You may assum	e an unexpired personal property lease if	f the trustee does not assume it. 11 U.S.C. § 365(p)(2	2).
Describe your u	unexpired personal property leases		Will the lease be assumed?
Lessor's name:			□ No
Description of le Property:	ased		□ Vaa
			☐ Yes
Lessor's name:			□ No
Description of le	ased		
Property:			☐ Yes

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Debtor 1 Debtor 2	ANGELA MARIE SALES	Case number (if known)	23-11777
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
property t	nalty of perjury, I declare that I have indicated my intention about that is subject to an unexpired lease.	any property of my estate that sec	cures a debt and any personal
, <u> </u>		/s/ ANGELA MARIE SALES ANGELA MARIE SALES	
_		Signature of Debtor 2	
Date	May 16, 2023 Dat	e <u>May 16, 2023</u>	

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court District of Nevada

In	re	CHRISTOPHE ANGELA MAR		CHAEL LOCASH ALES		Case N	Э.	23-11777	
					Debtor(s)	Chapter		7	
1.	Du				SATION OF ATTOR			` ,	nat
1.	cor	npensation paid to	o me v	within one year before the filing	g of the petition in bankruptcy, f or in connection with the bank	or agreed to be pa	id to	me, for services ws:	
								999.00	
		Prior to the filir	ng of t	his statement I have received				999.00	
		Balance Due				\$		0.00	
2.	\$_	<b>338.00</b> of the	filing	g fee has been paid.					
3.	Th	e source of the co	mpen	sation paid to me was:					
		Debtor		Other (specify):					
4.	Th	e source of compe	ensatio	on to be paid to me is:					
		Debtor		Other (specify):					
5.		I have not agree	d to sl	nare the above-disclosed compe	ensation with any other person u	inless they are mo	embei	rs and associates	of my law firm.
					tion with a person or persons was of the people sharing in the				y law firm. A
6.	In	return for the abo	ve-dis	sclosed fee, I have agreed to rer	nder legal service for all aspects	of the bankruptc	y case	e, including:	
	b. c.	Preparation and f	iling of the o	of any petition, schedules, state lebtor at the meeting of creditor	ring advice to the debtor in dete ment of affairs and plan which rs and confirmation hearing, and	may be required;		-	nkruptcy;
7.	Ву	Negotiation Represen	ons w	ith secured creditors to re	does not include the following educe to market value purs chargeability actions, judic	uant to 506(a)	cram	n down or 722 , relief from st	redemptions. ay actions or
					CERTIFICATION				
thi		ertify that the fore kruptcy proceedir		is a complete statement of any	agreement or arrangement for	payment to me fo	r repr	resentation of the	e debtor(s) in
		/ 16, 2023			/s/ Seth D Ballstae				
	Date	2			Seth D Ballstaedt, Signature of Attorney				
					Fair Fee Legal Sei	rvices			
					8751 W. Charlesto Suite 220	on Bivd.			
					Las Vegas, NV 89		.45		
					(702) 715-0000 Fa help@bkvegas.co		215		
					Name of law firm				

# **United States Bankruptcy Court District of Nevada**

**CHRISTOPHER MICHAEL LOCASH** 

Date: May 16, 2023

In re	ANGELA MARIE SALES		Case No.	23-11///
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR MA	ATRIX	
The abo	ove-named Debtors hereby verify	that the attached list of creditors is true and correct	ct to the best	of their knowledge.
Date:	May 16, 2023	/s/ CHRISTOPHER MICHAEL LOC		
		Signature of Debtor		

/s/ ANGELA MARIE SALES
ANGELA MARIE SALES
Signature of Debtor

CHRISTOPHER MICHAEL LOCASH ANGELA MARIE SALES 320 HUNTLY RD LAS VEGAS, NV 89145-5129

Seth D Ballstaedt, Esq. Fair Fee Legal Services 8751 W. Charleston Blvd. Suite 220 Las Vegas, NV 89117

Ace Cash Express 2237 E Riverside Drive #102 Austin, TX 78741

Atlantic Capital Bank Acct No 18877138 Attn: Bankruptcy 945 East Paces Ferry Road, 16th Floor Atlanta, GA 30326

Austin Capital Bank Acct No 8001420911 Attn: Bankruptcy Dept 8100 Shoal Creek Blvd, Ste 100 Austin, TX 78757

Cash 1 6708 W Cheyenne Ave Las Vegas, NV 89108

Central Portfolio Control Acct No PALL232977 Attn: Bankruptcy 10249 Yellow Circle Dr, Ste 200 Minnetonka, MN 55343

Central Portfolio Control Acct No PALL232978 Attn: Bankruptcy 10249 Yellow Circle Dr, Ste 200 Minnetonka, MN 55343

Check City 1990 N. Rainbow Las Vegas, NV 89108

Cornerstone
Acct No 2420923191KU00001
Pob Box 145122
Salt Lake City, UT 84114

Covington Credit Acct No 7441 21777 Attn: Bankruptcy Po Box 1947 Greenville, SC 29602

Covington Credit Acct No 7441 21030 Attn: Bankruptcy Po Box 1947 Greenville, SC 29602

Covington Credit/smc Acct No 744121030 Attn: Bankruptcy Po Box 1947 Greenville, SC 29602

Dept. of Employment, Training & Rehab Employment Security Division 500 East Third Street Carson City, NV 89713

Dynamic Au Acct No 7141 1500 E Cesar Chavez Austin, TX 78702

Eastern Account System, Inc. Acct No 00000000033595707 Attn: Bankruptcy 111 Park Ridge Rd Brookfield, CT 06804

Enhanced Recovery Company Acct No 227353368 Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

Fingerhut Acct No 6369921092421444 Attn: Bankruptcy 6250 Ridgewood Road Saint Cloud, MN 56303

First Premier Bank Acct No 5178006858181235 Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117 Hfh/covington Credit O Acct No T744121777 Po Box 1947 Greenville, SC 29602

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kikoff Lending Llc Acct No CLEM6GKTY3 Attn: Bankruptcy 75 Broadway Suite 226 San Francisco, CA 94111

LendNation 2095 N. Jones Blvd. Las Vegas, NV 89108

Midland Funding/Midland Credit Mgmt Acct No 316732696 Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

Midland Funding/Midland Credit Mgmt Acct No 316800459 Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

Mission Lane LLC Acct No 4315034304244487 Attn: Bankruptcy P.O. Box 105286 Atlanta, GA 30348

Mohela Acct No 900000522078513 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Mohela Acct No 900000523008113 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Mohela Acct No 900000517618414 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005 Mohela Acct No 900000516309515 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Mohela Acct No 900000516309415 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Mohela Acct No 900000522519913 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Mohela Acct No 900000517618314 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Mohela Acct No 900000522519813 Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Money Tree 7291 W. Lake Mead Blvd Las Vegas, NV 89128

Mountain View Hospital 3100 N Tenaya Way Las Vegas, NV 89128

National Credit Adjusters, LLC Acct No 7786540826 327 West 4th Avenue Po Box 3023 Hutchinson, KS 67504

National Credit Adjusters, LLC Acct No 201P006033545 327 West 4th Avenue Po Box 3023 Hutchinson, KS 67504

Nevada Dept. of Taxations, Bankruptcy 555 E Washington Ave, #1300 Las Vegas, NV 89101

Pro Collect, Inc Acct No 471010012346481 Attn: Bankruptcy 12170 N Abrams Road, Ste 100 Dallas, TX 75243

Rapid Cash 1532 N Jones Blvd, Las Vegas Las Vegas, NV 89108

Rash Curtis & Associates Acct No 3091960003581876 Attn: Bankruptcy 190 S. Orchard Ave Vacaville, CA 95688

Sallie Mae, Inc Acct No 97970898681E00120191009220128 Attn: Bankruptcy Po Box 9500 Wilkes Barre, PA 18773

Simplebill Acct No CE47F2AD799D53C40889

Simplebill Acct No CE47F2AD799D53C40889

Tacaccpt
Acct No 170529A
Po Box 153156
Austin, TX 78715

Tacaccpt
Acct No 2060401
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U.S. Department of Education Acct No 42326621 Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116

U.S. Department of Education Acct No 42326931 Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116 U.S. Department of Education Acct No 42326599 Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116

U.S. Department of Education Acct No 42326626 Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116

U.S. Department of Education Acct No 42326608 Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116

U.S. Department of Education Acct No 42326616 Ecmc/Attn: Bankruptcy P.O. Box 16408 Saint Paul, MN 55116

United Revenue Corp. Acct No 10148842 Attn: Bankruptcy 204 Billings Street Ste 120 Arlington, TX 76010

United States Trustee 300 Las Vegas Blvd. South #4300 Las Vegas, NV 89101

Used Car Outlet 2580 Duneville St Las Vegas, NV 89146

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